



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0061
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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/881,407
Filing Date	June 13, 2001
First Named Inventor	Zhongze Wang
Art Unit	2822
Examiner Name	Pamela E. Perkins
Attorney Docket Number	MI22-1670

6949479

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	PTO Return Postcard Receipt; Request for Certificate of Correction; Certificate of Correction (2); A \$100.00 Check
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

Patent No.: 6,949,479 B2

Issued: September 27, 2005

**Certificate
of Correction**
MAY 23 2006**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name	Wells St. John P.S.		
Signature			
Printed name	Robert C. Hyja		
Date	5/17/06	Reg. No.	46,791

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Natalie King	Date	5/17/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

MAY 24 2006



Effective on 12/08/2004.
Pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 100.00

Complete if Known

Application Number 09/881,407
Filing Date June 13, 2002
First Named Inventor Zhongze Wang
Examiner Name Pamela E. Perkins
Art Unit 2822
Attorney Docket No. MI22-1670

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 23-0925 Deposit Account Name: Wells St. John, P.S.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims - 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims - 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims
Fee (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Certificate of Correction

Fees Paid (\$)
\$100.00

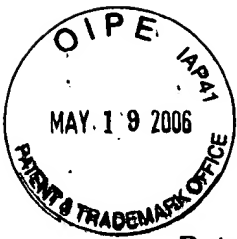
SUBMITTED BY

Signature _____ Registration No. 46,791 Telephone 509.624.4276
(Attorney/Agent)
Name (Print/Type) Robert C. Hyra Date 5/17/06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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MAY 24 2006



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent No 6,949,479 B2
Patent Issue Date September 27, 2005
Application Serial No. 09/881,407
Filing Date June 13, 2001
Assignee Micron Technology, Inc.
Inventorship Shongze Wang
Attorney's Docket No. MI22-1670
Title: Methods of Forming Transistor Devices

**REQUEST FOR CERTIFICATE OF CORRECTION OF PATENT FOR
APPLICANT MISTAKE and PTO MISTAKES (37 C.F.R. §§ 1.322(a) and 1.323)**

To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
ATTN: Decision and Certificate of Correction
Branch of the Patent Issue Division

From: Robert C. Hyta (Tel. 509-624-4276; Fax 509-838-3424)
Wells St. John P.S.
601 W. First Avenue, Suite 1300
Spokane, WA 99201-3828

05/22/2006 BABRAHA1 00000000 6949479

01-FC-1811

100.00 OP

Sir:

It is hereby requested that a Certificate of Correction be issued with respect to Patent No. 6,949,479 B2, granted September 27, 2005, in accordance with the Certificate of Correction form attached hereto in duplicate.

It is noted that an error appears in this patent of a typographical nature of character, as more fully described below. The error occurred in good faith. Correction thereof does not involve such changes in the patent as would constitute new matter or would require re-examination.

The other error listed on the Certificate of Correction form were apparently incurred through the fault of the PTO as will be disclosed by the records of files in the Office.

MAY 24 2006

Attached hereto, in duplicate, is Form PTO-1050, with at least one copy being suitable for printing.

The exact page and line number where the error occurs in the application file are:

Page 9, paragraph 28, line 4.

Enclosed is a check in the amount of \$100.00, as required by 37 CFR 1.20(a).

Respectfully submitted,

Dated: _____

5/17/06

By: _____



Robert C. Hyta
Reg. No. 46,791

MAY 24 2006

UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION

PATENT NO. : 6,949,479 B2
DATED : September 27, 2005
INVENTOR(S) : Wang

It is certified that errors appear in the above-identified patent and that said Letters Patent is hereby corrected as shown below:

Col. 1, line 17, please delete "El" after "over" and insert --a--.

Col. 4, line 37, please delete "an" after "minutes," and insert --and--.

Page
1 of 1

Mailing Address of Sender:
Robert C. Hyta
Wells St. John P.S.
601 West First Avenue, Suite 1300
Spokane, WA 99201-3828

Patent No. 6,949,479 B2

MAY 24 2006

UNITED STATES PATENT AND TRADEMARK OFFICE
CERTIFICATE OF CORRECTION

PATENT NO. : 6,949,479 B2
DATED : September 27, 2005
INVENTOR(S) : Wang

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Col. 1, line 17, please delete "El" after "over" and insert --a--.

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MAY 24 2006